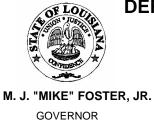
DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS



Public Safety Services



IMPAIRMENT NOTIFICATION

Dear Building Owner/Manager:

Name and Location of Business

The below listed firm has found impairments to the fire protection system or equipment in the building listed below. Per Louisiana Administrative Code Title 55:V:3043, the firm is required to notify the Office of the State Fire Marshal Code Enforcement and Building Safety within two days in writing of any impairment which may jeopardize the life safety of the building's occupants. The impairments are listed below. A deputy from this office or the local fire prevention bureau will be sent out to verify the impairments and to order corrections to be made.

NT.	
Name:	
Address:	
City:	
Telephone Number:	
Type of System/Equipment (include manufacturer and model number):	
NFPA Code/Standard used for Inspection:	
11111 Code/Standard used for hispection.	
Impairments:	
Date of impairment:	
Firm Name:	
Firm License Number:	
Firm Telephone Number:	
Technician's Name:(print)	(cianotura)
License Number:(print)	_(signature)
License Number.	
Building Owner:	(print)
or Representative	(r/
•	(signature)
	`
Date:	

^{* * *}Note to technician: Please attach a copy of your firm's service report to this notification. * * *